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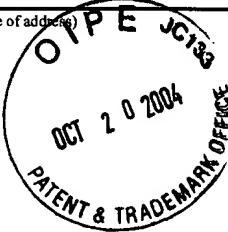
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7590 08/23/2004

Greer, Burns, & Crain, Ltd.
 Patrick G. Burns, Esq.
 300 S. Wacker Drive, Suite 2500
 Chicago, IL 60606

10/22/2004 MBERHE1 00000028 09627194

01 FC:1501 1370.00 OP



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Joseph P. Fox		(Depositor's name)
<i>Joseph P. Fox</i>		(Signature)
10/18/04		(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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09/627,194 07/27/2000 Kiyoshi Ozaki 1324.64545 1269

TITLE OF INVENTION: DISPLAY AND METHOD FOR REPAIRING DEFECTS THEREOF

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional NO \$1330 \$0 \$1330 11/23/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
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NGUYEN, HOAN C 2871 349-192000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Greer, Burns & Crain, Ltd.
 2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

FUJITSU DISPLAY
 TECHNOLOGIES CORPORATION

Kawasaki, Japan

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

Issue Fee
 Publication Fee (No small entity discount permitted)
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A check in the amount of the fee(s) is enclosed.

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The Director is hereby authorized to charge the required fee(s), or credit any overpayment Deposit Account Number 07-2069 (enclose an extra copy of this form).

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a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
 b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Joseph P. Fox

Date

10/18/04

Typed or printed name

Joseph P. Fox

Registration No.

41,760

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